

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

McKinley for Congress

ADDRESS (number and street)

PO Box 642

Check if different  
than previously  
reported. (ACC)

Morgantown

WV

26507

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00473132

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

WV

01

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

24

Y Y Y Y

2014

through

M M / D D / Y Y Y Y

06

D D / Y Y Y Y

30

Y Y Y Y

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Samuel Stone

Signature of Treasurer

Samuel Stone

[Electronically Filed]

Date

M M / D D / Y Y Y Y

07

D D / Y Y Y Y

15

Y Y Y Y

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 117

Write or Type Committee Name

McKinley for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	206947.28	1235438.76
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	4800.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	206947.28	1230638.76
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	113803.89	543609.51
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1600.71
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	113803.89	542008.80
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1473519.63	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	415000.00	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 117

Write or Type Committee Name

**McKinley for Congress**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:**

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

93900.00

553517.00

(ii) Unitemized.....

7847.28

49165.99

(iii) TOTAL of contributions from individuals ▶

101747.28

602682.99

(b) Political Party Committees.....

200.00

700.00

(c) Other Political Committees (such as PACs).....

105000.00

632055.77

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

206947.28

1235438.76

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

1600.71

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

206947.28

1237039.47

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 117

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	113803.89	543609.51
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	2400.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	2400.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	4800.00
21. OTHER DISBURSEMENTS .....	25.00	110375.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	113828.89	658784.51

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1380401.24
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	206947.28
25. SUBTOTAL (add Line 23 and Line 24).....	1587348.52
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	113828.89
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1473519.63

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD M. ADAMS**

Mailing Address 52 MEADOWCREST DRIVE

City	State	Zip Code
PARKERSBURG	WV	26104-9394

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 UNITED BANK

Occupation  
 CEO

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3600.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 / 11 / 2014

Transaction ID : SA11.7465

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS H. ADAMS**

Mailing Address 2700 E BRESSINGHAM WAY

City	State	Zip Code
BLOOMINGTON	IN	47401-4167

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 ADAMS ROOFING CO.

Occupation  
 OWNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 / 23 / 2014

Transaction ID : SA11.7580

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. GLENN T. ADRIAN**

Mailing Address 1015 LUCAS DRIVE

City	State	Zip Code
MORGANTOWN	WV	26505-8040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SELF EMPLOYED

Occupation  
 COMMERCIAL DEVELOPER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M / D D / Y Y Y Y  
 05 / 13 / 2014

Transaction ID : SA11.7407

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**Full Name (Last, First, Middle Initial)  
**MR. ROBERT V. ALLEN****A.** Mailing Address 246 RIDGEWAY DR.

City	State	Zip Code
BRIDGEPORT	WV	26330-1152

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIREDReceipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		12		2014

Transaction ID : SA11.7380

Amount of Each Receipt this Period

100.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**HENRY ALTMAYER**

Mailing Address 9 HAMILTON AVE

City	State	Zip Code
WHEELING	WV	26003-6633

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
ATTORNEYReceipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11.7618

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS AMAN**

Mailing Address 78 BARRINGTON CT STE 101

City	State	Zip Code
BRIDGEPORT	WV	26330-9264

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TOOTHMAN RICEOccupation  
CPAReceipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		13		2014

Transaction ID : SA11.7389

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

850.00

✕	11a		11b		11c		11d		
	12		13a		13b		14		15

NAME OF COMMITTEE (In Full)  
McKinley for Congress

FEC Schedule A (Form 3) (Revised 02/2009)

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)  
**MR. JACK G. BAZEMORE**

Mailing Address P.O. BOX 238

City	State	Zip Code
HUNTINGTON	WV	25707-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**JABO**

Occupation  
**EXECUTIVE**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7527

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**MR. JOSEPH W. BEAN**

Mailing Address 435 CHESHIRE FARM LN

City	State	Zip Code
TOWN AND COUNTRY	MO	63141-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**PATRIOT COAL CORPORATION**

Occupation  
**SENIOR VICE PRESIDENT - LAW & ADMINIS**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7529

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**MR. WILLIAM MARTSON BECKER**

Mailing Address 232 LOCHA DR

City	State	Zip Code
JUPITER	FL	33458-7733

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**MAX CAPITAL GROUP**

Occupation  
**INSURANCE**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7476

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2800.00

Diagram illustrating the layout of the 15 questions in the test:

X	11a		11b		11c		11d	
	12		13a		13b		14	
								15

NAME OF COMMITTEE (In Full)  
McKinley for Congress

## CONTRIBUTION

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**Full Name (Last, First, Middle Initial)  
**A. MR. JOSEPH W. BOUTAUGH**Mailing Address **4 POPLAR AVE., APT. 1**

City	State	Zip Code
WHEELING	WV	26003-5781

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2014

Transaction ID : SA11.7442

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. FRANK CALANDRA JR.**Mailing Address **P.O. BOX 111253**

City	State	Zip Code
PITTSBURGH	PA	15238-0653

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JENNMAROccupation  
PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

Transaction ID : SA11.7486

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. KARL A. CALANDRA**Mailing Address **258 KAPPA DRIVE**

City	State	Zip Code
PITTSBURGH	PA	15238-2818

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JENNMAROccupation  
EXECUTIVE VICE PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

Transaction ID : SA11.7487

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2100.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**Full Name (Last, First, Middle Initial)  
**MR. PAUL CAMPBELL**A. Mailing Address **P.O BOX 1488**

City	State	Zip Code
CHILHOWIE	VA	24319-1488

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**LONGWELL ASSOCIATES INC**Occupation  
**MANAGER**Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7494

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JEANNE CARTER**Mailing Address **190 BOGGS HILL RD**

City	State	Zip Code
WHEELING	WV	26003-9392

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**NONE**Occupation  
**RETIRED**Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11.7606

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. MICHAEL J. CARUSO**Mailing Address **114 ELM ST**

City	State	Zip Code
WHEELING	WV	26003-6010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**NONE**Occupation  
**RETIRED**Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2014

Transaction ID : SA11.7446

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1100.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**MR. VAN W. CHISLER**Mailing Address **6425 MASON DIXON HWY.**

City

**BLACKSVILLE**

State

**WV**

Zip Code

**26521-8201**FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**CHISLER BROTHERS**Occupation  
**CONTRACTOR**

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2014

**Transaction ID : SA11.7416**

Amount of Each Receipt this Period

**200.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. JAMES R. CLENDENEN**Mailing Address **P.O. BOX 128**

City

**RACINE**

State

**WV**

Zip Code

**25165-0128**FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**PATRIOT COAL CORPORATION**Occupation  
**MAINTENANCE SUPERINTENDENT**

Receipt For: 2014

☐ Primary    ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2014

**Transaction ID : SA11.7545**

Amount of Each Receipt this Period

**300.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. MATTHEW COOK**Mailing Address **5 EASTCOVE LANE**

City

**SOUTH CHARLESTON**

State

**WV**

Zip Code

**25309-8554**FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**CATENARY COAL**Occupation  
**MANAGER**

Receipt For: 2014

☐ Primary    ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2014

**Transaction ID : SA11.7514**

Amount of Each Receipt this Period

**300.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....**800.00**

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

A. Full Name (Last, First, Middle Initial)  
**MS. CAROLYN S. COOKE**

Mailing Address **100 58TH STREET**

City	State	Zip Code
VIENNA	WV	26105-2026

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED PER BEST EFF**

Occupation  
**INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**500.00**

Date of Receipt

**06 / 11 / 2014**

**Transaction ID : SA11.7462**

Amount of Each Receipt this Period

**500.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**LISA COOPER**

Mailing Address **202 WOOD LILY LN**

City	State	Zip Code
CARY	NC	27518-8310

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PMI ASH TECHNOLOGIES**

Occupation  
**SENIOR VICE PRESIDENT**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**500.00**

Date of Receipt

**06 / 30 / 2014**

**Transaction ID : SA11.7597**

Amount of Each Receipt this Period

**500.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**MR. GORDON COPLAND**

Mailing Address **600 HALL ST**

City	State	Zip Code
BRIDGEPORT	WV	26330-1363

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**STEPTOE & JOHNSON**

Occupation  
**ATTORNEY**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**1750.00**

Date of Receipt

**05 / 13 / 2014**

**Transaction ID : SA11.7400**

Amount of Each Receipt this Period

**750.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1750.00**

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

A. Full Name (Last, First, Middle Initial)  
**MR. KEVIN S. CRUTCHFIELD**

Mailing Address **14964 SPRINGVIEW RIDGE**

City State Zip Code  
**BRISTOL VA 24202-4567**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ALPHA NATURAL RESOURCES**

Occupation  
**CEO**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**1000.00**

Date of Receipt

**06 / 11 / 2014**

Transaction ID : **SA11.7537**

Amount of Each Receipt this Period

**500.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**MR. MICHAEL D. DAY**

Mailing Address **1265 COUNTRY ESTATES ROAD**

City State Zip Code  
**DANVILLE WV 25053-9237**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PATRIOT COAL CORPORATION**

Occupation  
**VP OF OPERATIONS**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**300.00**

Date of Receipt

**06 / 11 / 2014**

Transaction ID : **SA11.7556**

Amount of Each Receipt this Period

**300.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**MR. PATRICK D. DEEM**

Mailing Address **623 RIVENDELL DR**

City State Zip Code  
**BRIDGEPORT WV 26330-1357**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**STEPTOE & JOHNSON**

Occupation  
**ATTORNEY**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**1250.00**

Date of Receipt

**05 / 08 / 2014**

Transaction ID : **SA11.7371**

Amount of Each Receipt this Period

**500.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1300.00**

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DAVID RICHARD DOERR**  
 Mailing Address 3209 LINDEN STREET

City State Zip Code  
 PARKERSBURG WV 26104-1705

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 GENE HAYNES

Occupation  
 INSURANCE

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 11 2014

Transaction ID : SA11.7469

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. STEVE R. DOTY**  
 Mailing Address 12 CHATWOOD RD

City State Zip Code  
 CHARLESTON WV 25304-2765

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 PEERLESS BLOCK & BRICK CO.

Occupation  
 MANUFACTURING

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 300.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 11 2014

Transaction ID : SA11.7544

Amount of Each Receipt this Period

200.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. RALPH S. DOVER**  
 Mailing Address 91 ALPINE DR

City State Zip Code  
 BUNKER HILL WV 25413-3207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 330.00

Date of Receipt

M M / D D / Y Y Y Y  
 05 13 2014

Transaction ID : SA11.7386

Amount of Each Receipt this Period

50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**MR. ROBERT DUNCAN**

Mailing Address 705 SOUTH BLVD

City

HUNTINGTON

State

WV

Zip Code

25701-4868

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7538

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MRS. SHELLY R. DUNCAN**

Mailing Address 2014 ICES FERRY DR.

City

MORGANTOWN

State

WV

Zip Code

26508-8059

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WV ASSOCIATION OF LOCAL HEALTH DEPT

Occupation

EXECUTIVE DIRECTOR

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2014

Transaction ID : SA11.7412

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. MICHAEL DUVALL**

Mailing Address 2722 LAKEVIEW DRIVE

City

ST. ALBANS

State

WV

Zip Code

25177-3460

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INTERNATIONAL COAL GROUP, INC.

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7509

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1400.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. CHARLES A. EBETINO**

Mailing Address 3694 SEAFORD DRIVE

City State Zip Code  
COLUMBUS OH 43220-4842

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PATRIOT COAL CORPORATIONOccupation  
SENIOR VP

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

Transaction ID : SA11.7502

Amount of Each Receipt this Period

300.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. WAYNE ELKINS**

Mailing Address P.O. BOX 823

City State Zip Code  
UNEEDA WV 25205-0823

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PATRIOT COAL CORPORATIONOccupation  
VICE PRESIDENT MATERIALS MANAGEMEN

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

Transaction ID : SA11.7499

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. KEVIN K. ELLIS**

Mailing Address 228 MORRIS STREET

City State Zip Code  
MORGANTOWN WV 26501-7526

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ANTERO RESOURCES CORPORATIONOccupation  
ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		13		2014

Transaction ID : SA11.7413

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1050.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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PAGE 18 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RAYMOND J. FANTA**  
 Mailing Address 5207 PENNY LANE

City State Zip Code  
 VIENNA WV 26105-3176

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 WATERS INSURANCE

Occupation  
 PRESIDENT

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 500.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 11 2014

Transaction ID : SA11.7460

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JAMES H. FLETCHER**  
 Mailing Address 2 WILLOW GLEN RD

City State Zip Code  
 HUNTINGTON WV 25701-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 FLETCHER MINING EQUIPMENT

Occupation  
 OWNER

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 1300.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 11 2014

Transaction ID : SA11.7554

Amount of Each Receipt this Period

1300.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. FRANK FOSTER**  
 Mailing Address P.O BOX 29

City State Zip Code  
 CHAPMANVILLE WV 25508-0029

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 NICHOLAS ENERGY

Occupation  
 VICE PRESIDENT

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 300.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 11 2014

Transaction ID : SA11.7495

Amount of Each Receipt this Period

300.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2100.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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PAGE 19 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**McKinley for Congress**
**A.** Full Name (Last, First, Middle Initial)  
**MR. RONALD REAGAN FOSTER**  
 Mailing Address P.O. BOX 467

City	State	Zip Code
SCOTT DEPOT	WV	25560-0467

 FEC ID number of contributing  
 federal political committee.

 C

 Name of Employer  
 FOSTER SUPPLY INC.

 Occupation  
 OWNER

 Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

 Election Cycle-to-Date  
 2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7481

Amount of Each Receipt this Period

 500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. CARL N. FRANKOVITCH**  
 Mailing Address 337 PENCO RD.

City	State	Zip Code
WEIRTON	WV	26062-3828

 FEC ID number of contributing  
 federal political committee.

 C

 Name of Employer  
 FRANKOVITCH ANETAKIS

 Occupation  
 ATTORNEY

 Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

 Election Cycle-to-Date  
 2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		01		2014

Transaction ID : SA11.7349

Amount of Each Receipt this Period

 1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. SCOTT FRESHWATER**  
 Mailing Address 929 CHARLESTON ROAD

City	State	Zip Code
SPENCER	WV	25276-9264

 FEC ID number of contributing  
 federal political committee.

 C

 Name of Employer  
 RESERVE OIL & GAS INC.

 Occupation  
 VICE PRESIDENT

 Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

 Election Cycle-to-Date  
 1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7478

Amount of Each Receipt this Period

 1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

 2500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**Full Name (Last, First, Middle Initial)  
**A. MS. BLAIR M. GARDENER**

Mailing Address P.O. BOX 553

City  
CHARLESTONState  
WVZip Code  
25322-0553FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JACKSON KELLY, PLLCOccupation  
ATTORNEY

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

Transaction ID : SA11.7485

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**B. MR. CHRISTOPHER S. GOODE**

Mailing Address 312 OAKVIEW DRIVE

City  
BRIDGEPORTState  
WVZip Code  
26330-9638FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNITED HOSPITAL CENTEROccupation  
PHYSICIAN

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		09		2014

Transaction ID : SA11.7565

Amount of Each Receipt this Period

200.00

CONTRIBUTION

**C. MR. F. TOM GRAFF, JR.**

Mailing Address P.O. BOX 1386

City  
CHARLESTONState  
WVZip Code  
25325-1386FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BOWLES RICEOccupation  
ATTORNEY

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11.7600

Amount of Each Receipt this Period

700.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1150.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 21 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**MR. F. TOM GRAFF, JR.**

Mailing Address P.O. BOX 1386

City

CHARLESTON

State

WV

Zip Code

25325-1386

FEC ID number of contributing federal political committee.

C

Name of Employer  
BOWLES RICEOccupation  
ATTORNEY

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2014

Transaction ID : SA11.7638

Amount of Each Receipt this Period

300.00

CONTRIBUTION

EVENT CATERING

Full Name (Last, First, Middle Initial)

**MR. GOUVERNEUR C. GRANEY**

Mailing Address 6 GAT CREEK ROAD

City

CHARLESTON

State

WV

Zip Code

25314-1930

FEC ID number of contributing federal political committee.

C

Name of Employer  
PETROLEUM PRODUCTS, INC.Occupation  
SALES

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7477

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. MIKE RICHARD GRANEY**

Mailing Address 1234 UPPER RIDGEWAY ROAD

City

CHARLESTON

State

WV

Zip Code

25314-1428

FEC ID number of contributing federal political committee.

C

Name of Employer  
ONE STOPOccupation  
BUSINESS

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7472

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1550.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 22 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

A. Full Name (Last, First, Middle Initial)  
**MR. PATRICK C. GRANEY, III**

Mailing Address 500 RIVER EAST DR

City	State	Zip Code
BELLE	WV	25015-1081

FEC ID number of contributing federal political committee.

C

Name of Employer  
**PETROLEUM PRODUCTS INC**

Occupation  
**EXECUTIVE**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7474

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**MR. ROBERT E. HADEN**

Mailing Address 26 VINTER PLACE

City	State	Zip Code
MORGANTOWN	WV	26505-3905

FEC ID number of contributing federal political committee.

C

Name of Employer  
**DIPPEL & DIPPEL**

Occupation  
**OWNER**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Transaction ID : SA11.7429

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**MS. TERESA D. HALL**

Mailing Address P.O. BOX 399

City	State	Zip Code
ELLENBORO	WV	26346-0399

FEC ID number of contributing federal political committee.

C

Name of Employer  
**TRENTON ENERGY**

Occupation  
**OIL & GAS PRODUCER**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7468

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**RASHID HALLAWAY****A.**

Mailing Address 522 MAGNOLIA AVE

City

CHARLOTTE

State

NC

Zip Code

28203-5644

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMERICAN PATRIOT GROUP

Occupation

VICE PRESIDENT

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		05		2014

**Transaction ID : SA11.7575**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)

**MR. DOUGLAS R. HARDMAN**

Mailing Address 2 SIERRA CIRCLE

City

HUNTINGTON

State

WV

Zip Code

25705-2114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

J.H. FLETCHER &amp; CO

Occupation

VICE CHAIRMAN

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

**Transaction ID : SA11.7546**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)

**MR. ROBERT H. HARTONG**

Mailing Address 29 ROMNEY RD

City

WHEELING

State

WV

Zip Code

26003-5662

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2014

**Transaction ID : SA11.7434**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2100.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

A. Full Name (Last, First, Middle Initial)  
**MS. ROSANNA L. HARTSOG**

Mailing Address 23 CEDAR DRIVE

City State Zip Code  
HURRICANE WV 25526-9221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAMC-TEAYS VALLEY HOSPITALOccupation  
NURSE

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7549

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**MR. CRAIG W. HARTZELL**

Mailing Address 3741 MORGANTOWN INDUSTRIAL PARK

City State Zip Code  
MORGANTOWN WV 26501-2347

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AZIMUTH INCOccupation  
OWNER

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2014

Transaction ID : SA11.7383

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**MR. MICHAEL S. HARVEY**

Mailing Address 6004 PINNACLE VIEW

City State Zip Code  
HURRICANE WV 25526-7430

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JACKSON KELLY, PLLCOccupation  
ATTORNEY

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7503

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**A. Full Name (Last, First, Middle Initial)  
**MR. BENNETT K. HATFIELD**

Mailing Address P.O. BOX 2405

City	State	Zip Code
CHARLESTON	WV	25329-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PATRIOT COALOccupation  
CEO

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7522

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**MR. DARRYL L. HAYNES**

Mailing Address 12313 MALLARD BAY DRIVE

City	State	Zip Code
KNOXVILLE	TN	37922-9364

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EXPRESS CABLEOccupation  
OWNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7547

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**DR. ROBERT E. HEFLIN, II**

Mailing Address 6 FAIRVIEW HEIGHTS

City	State	Zip Code
PARKERSBURG	WV	26101-2918

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNITED ANESTHESIA INCOccupation  
PHYSICIAN

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2014

Transaction ID : SA11.7381

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4100.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. COURTLAND J. HELBIG**

Mailing Address 3029 GREYSTONE DR

City State Zip Code  
MORGANTOWN WV 26508-8600

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
G.M.S.Occupation  
PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7568

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DR. MICHAEL HENSLEY**

Mailing Address 102 WEDGEWOOD PL

City State Zip Code  
PARKERSBURG WV 26104-9227

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PARKERSBURG RADIOLOGY SVCOccupation  
RADIOLOGIST

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		08		2014

Transaction ID : SA11.7370

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL K. HINES**

Mailing Address 244 CLOWN ALY

City State Zip Code  
CHAPMANVILLE WV 25508-1109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DOW LOHNES & ALBERTSONOccupation  
ATTORNEY

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11.7628

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

A. Full Name (Last, First, Middle Initial)  
**MR. GARY HOLLANDSWORTH**

Mailing Address P.O BOX 18091

City	State	Zip Code
SOUTH CHARLESTON	WV	25303-8091

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**PATRIOT COAL CORPORATION**

Occupation  
**VP SALES AND MARKETING**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7497

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**W. P. HOLLOWAY**

Mailing Address 55 FOREST HILLS DR

City	State	Zip Code
WHEELING	WV	26003-6645

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**HAZLETT, BURT & WATSON**

Occupation  
**FINANCIAL ADVISOR**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11.7612

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**MR. CHARLES W. HUGUENARD**

Mailing Address 1256 CAMBRIDGE AVE

City	State	Zip Code
MORGANTOWN	WV	26505-3259

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**LONGVIEW POWER, LLC**

Occupation  
**EXECUTIVE**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11.7614

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)  
**MR. SAMUEL M. JASPER**

Mailing Address **474 STONEHENGE ROAD**

City	State	Zip Code
FAYETTEVILLE	WV	25840-6672

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SANSHELL PRODUCTS, INC.**

Occupation  
**PRESIDENT**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

**06 / 11 / 2014**

Transaction ID : **SA11.7489**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**MR. CHARLES T. JONES**

Mailing Address **#2 PORT AMHERST DRIVE**

City	State	Zip Code
CHARLESTON	WV	25306-6637

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PRITCHARD MINING**

Occupation  
**MINING ENGINEER**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1850.00

Date of Receipt

**05 / 13 / 2014**

Transaction ID : **SA11.7411**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**MR. CHARLES T. JONES**

Mailing Address **#2 PORT AMHERST DRIVE**

City	State	Zip Code
CHARLESTON	WV	25306-6637

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PRITCHARD MINING**

Occupation  
**MINING ENGINEER**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1850.00

Date of Receipt

**06 / 11 / 2014**

Transaction ID : **SA11.7484**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2250.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**Full Name (Last, First, Middle Initial)  
**MR. JOHNNY R. JONES****A.** Mailing Address 23 COVENTRY RD

City	State	Zip Code
SOUTH CHARLESTON	WV	25309-9527

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED PER BEST EFFOccupation  
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7493

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT JONES**

Mailing Address 139 E CARDINAL AVE

City	State	Zip Code
WHEELING	WV	26003-2601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL INCOccupation  
OWNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11.7609

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. WILBUR JONES**

Mailing Address 162 CABIN RD

City	State	Zip Code
WHEELING	WV	26003-1642

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2014

Transaction ID : SA11.7643

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)  
**EVANS KING**

Mailing Address **423 STANLEY AVE**

City	State	Zip Code
CLARKSBURG	WV	26301-3123

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**STEPTOE & JOHNSON**

Occupation  
**ATTORNEY**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**1000.00**

Date of Receipt

**05 / 13 / 2014**

**Transaction ID : SA11.7393**

Amount of Each Receipt this Period

**500.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**MR. OREN KITTS**

Mailing Address **1509 MOUNT VERNON RD**

City	State	Zip Code
CHARLESTON	WV	25314-2533

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ALPHA NATURAL RESOURCES**

Occupation  
**SENIOR VICE PRESIDENT**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**3500.00**

Date of Receipt

**05 / 29 / 2014**

**Transaction ID : SA11.7431**

Amount of Each Receipt this Period

**1000.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**MR. OREN KITTS**

Mailing Address **1509 MOUNT VERNON RD**

City	State	Zip Code
CHARLESTON	WV	25314-2533

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ALPHA NATURAL RESOURCES**

Occupation  
**SENIOR VICE PRESIDENT**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**3500.00**

Date of Receipt

**06 / 30 / 2014**

**Transaction ID : SA11.7642**

Amount of Each Receipt this Period

**1000.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2500.00**

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 31 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD KOEHLER**

Mailing Address 204 WESTMINISTER DR.

City	State	Zip Code
WHEELING	WV	26003-5579

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 ADVANTAGE PAYROLL SERVICE

Occupation  
 PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2817.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		01		2014

**Transaction ID : SA11.7350**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DENNIS KOZICKI**

Mailing Address 15 PINEWOOD DRIVE

City	State	Zip Code
WHEELING	WV	26003-9306

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 BODKIN WILSON & KOZICKI

Occupation  
 CPA

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

**Transaction ID : SA11.7607**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS J. LANE**

Mailing Address P.O. BOX 1386

City	State	Zip Code
CHARLESTON	WV	25325-1386

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 BOWLES RICE

Occupation  
 ATTORNEY

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

**Transaction ID : SA11.7555**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

 A. Full Name (Last, First, Middle Initial)  
**MR. GLENN & JARRELL C. LAREW**  
 Mailing Address 149 MEADOW VIEW LANE

City	State	Zip Code
MORGANTOWN	WV	26508-2909

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 SELF EMPLOYED

 Occupation  
 LAND DEVELOPMENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2014

Transaction ID : SA11.7358

Amount of Each Receipt this Period

250.00

CONTRIBUTION

 B. Full Name (Last, First, Middle Initial)  
**MR. HENRY LAWRENCE**  
 Mailing Address 411 W PHILADELPHIA AVE

City	State	Zip Code
BRIDGEPORT	WV	26330-1459

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 STEPTOE & JOHNSON

 Occupation  
 ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2014

Transaction ID : SA11.7392

Amount of Each Receipt this Period

500.00

CONTRIBUTION

 C. Full Name (Last, First, Middle Initial)  
**MR. JERRY D. LESTER**  
 Mailing Address 1411 MEATHOUSE FK

City	State	Zip Code
CANADA	KY	41519-8212

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 H-E PARTS MINING

 Occupation  
 DISTRICT MANAGER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7525

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DR. ROSA LIFSON**

Mailing Address 57 ALEXANDER DR

City State Zip Code  
WILLIAMSTOWN WV 26187-8302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAMDEN CLARKOccupation  
PHYSICIAN

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		09		2014

Transaction ID : SA11.7566

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. RANDALL C. LIGHT**

Mailing Address RR 1 BOX 258L

City State Zip Code  
CLARKSBURG WV 26301-9741

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STEPTOE & JOHNSONOccupation  
ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2014

Transaction ID : SA11.7406

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. HENRY E. LOONEY**

Mailing Address 19310 HUNT CLUB RD

City State Zip Code  
ABINGDON VA 24211-6762

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED PER BEST EFFCOccupation  
INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7506

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DALE F. LUCHA**  
 Mailing Address 274 GENTLE BREEZE DRIVE

City State Zip Code  
 CHAPMANVILLE WV 25508-9495

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 PATRIOT COAL CORPORATION

Occupation  
 VP HUMAN RESOURCES

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 300.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 11 2014

Transaction ID : SA11.7552

Amount of Each Receipt this Period

200.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN E. LUSHEFSKI**  
 Mailing Address 52 BELLVUE AVE

City State Zip Code  
 RUMSON NJ 07760-1223

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 300.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 11 2014

Transaction ID : SA11.7550

Amount of Each Receipt this Period

300.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAMES N. MAGRO**  
 Mailing Address 500 LEE ST

City State Zip Code  
 EAST CHARLESTON WV 12530-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 PATRIOT COAL COMPANY

Occupation  
 SENIOR VICE PRESIDENT

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 11 2014

Transaction ID : SA11.7528

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 35 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**McKinley for Congress**Full Name (Last, First, Middle Initial)  
**MR. DAN A. MARSHALL**A. Mailing Address **P.O. BOX 61**

City	State	Zip Code
<b>PARKERSBURG</b>	<b>WV</b>	<b>26102-0061</b>

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**SELF EMPLOYED**Occupation  
**ATTORNEY**Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**2000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
<b>06</b>		<b>11</b>		<b>2014</b>

Transaction ID : **SA11.7459**

Amount of Each Receipt this Period

**1000.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**MRS. LINDA B. MCCORMICK**Mailing Address **5604 GREENMONT HILLS**

City	State	Zip Code
<b>VIENNA</b>	<b>WV</b>	<b>26105-3290</b>

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**SELF EMPLOYED**Occupation  
**ATTORNEY**Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**1000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
<b>06</b>		<b>11</b>		<b>2014</b>

Transaction ID : **SA11.7463**

Amount of Each Receipt this Period

**500.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**MEREDITH MCKINLEY**Mailing Address **10 KENWOOD PL**

City	State	Zip Code
<b>WHEELING</b>	<b>WV</b>	<b>26003-6004</b>

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**NONE**Occupation  
**HOMEMAKER**Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**2500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
<b>06</b>		<b>30</b>		<b>2014</b>

Transaction ID : **SA11.7610**

Amount of Each Receipt this Period

**2500.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....**4000.00**

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

A. Full Name (Last, First, Middle Initial)  
**MR. ROBERT G. MCLUSTY**

Mailing Address 1865 LOUDEN HEIGHTS RD

City State Zip Code  
 CHARLESTON WV 25314-1564

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 INFORMATION REQUESTED PER BEST EFF

Occupation  
 INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 11 2014

Transaction ID : SA11.7521

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)

**MR. THOMAS H. MICHEL**

Mailing Address RR1 BOX 23

City State Zip Code  
 BRIDGEPORT WV 26330-9305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 MICHEL, INC.

Occupation  
 CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M / D D / Y Y Y Y  
 05 13 2014

Transaction ID : SA11.7402

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)

**MR. ROBERT C. MILLER**

Mailing Address 25 ROMNEY RD

City State Zip Code  
 WHEELING WV 26003-5662

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M / D D / Y Y Y Y  
 05 05 2014

Transaction ID : SA11.7357

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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PAGE 37 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

A. Full Name (Last, First, Middle Initial)  
**MRS. KIRSTEN S. MORK**

Mailing Address 4600 KANAWHA AVE SE

City	State	Zip Code
CHARLESTON	WV	25304-1831

FEC ID number of contributing federal political committee.

C

Name of Employer  
 NONE

Occupation  
 HOMEMAKER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

Transaction ID : SA11.7480

Amount of Each Receipt this Period

400.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**MR. KYLE M. MORK**

Mailing Address 4600 KANAWHA AVE SE

City	State	Zip Code
CHARLESTON	WV	25304-1831

FEC ID number of contributing federal political committee.

C

Name of Employer  
 ENERGY CORPORATION OF AMERICA

Occupation  
 SENIOR VICE PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

Transaction ID : SA11.7479

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**CARROLL KELLY MORRISON**

Mailing Address 1401 AARON SMITH DR

City	State	Zip Code
BRIDGEPORT	WV	26330-9644

FEC ID number of contributing federal political committee.

C

Name of Employer  
 STEPTOE & JOHNSON

Occupation  
 ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		28		2014

Transaction ID : SA11.7343

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5600.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROGER L. NICHOLSON**

Mailing Address 1557 QUARRIER ST

City	State	Zip Code
CHARLESTON	WV	25311-2407

FEC ID number of contributing federal political committee.

C

Name of Employer  
 JACKSON KELLY PLLC

Occupation  
 ATTORNEY

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 / 10 / 2014

**Transaction ID : SA11.7578**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ROGER L. NICHOLSON**

Mailing Address 1557 QUARRIER ST

City	State	Zip Code
CHARLESTON	WV	25311-2407

FEC ID number of contributing federal political committee.

C

Name of Employer  
 JACKSON KELLY PLLC

Occupation  
 ATTORNEY

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 / 11 / 2014

**Transaction ID : SA11.7579**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. GARY NICKERSON**

Mailing Address 78 CARRIAGE LN

City	State	Zip Code
BRIDGEPORT	WV	26330-1345

FEC ID number of contributing federal political committee.

C

Name of Employer  
 STEPTOE & JOHNSON

Occupation  
 ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 05 / 13 / 2014

**Transaction ID : SA11.7391**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:

PAGE 39 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. FRANK O. NORTHRUP**  
 Mailing Address 932 51ST STREET

City State Zip Code  
 VIENNA WV 26105-3142

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 NORTHRUP EQUIPMENT CO.

Occupation  
 SALES

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 11 2014

Transaction ID : SA11.7464

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DR. MILTON E. NUGENT**  
 Mailing Address 117 ALEXANDER ESTATES

City State Zip Code  
 TRIADELPHIA WV 26059-1100

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 300.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 30 2014

Transaction ID : SA11.7617

Amount of Each Receipt this Period

300.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL PACYNA**  
 Mailing Address 8 ELGIN ST.

City State Zip Code  
 MORGANTOWN WV 26501-6904

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 U.S. CELLULAR

Occupation  
 PROJECT MANAGER

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 50.00

Date of Receipt

M M / D D / Y Y Y Y  
 05 13 2014

Transaction ID : SA11.7422

Amount of Each Receipt this Period

50.00

CONTRIBUTION

**[MEMO ITEM]**  
 SEE ATTRIBUTION BELOW

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1300.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**VOTESANE PAC**

Mailing Address P.O. BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301-0713

FEC ID number of contributing  
federal political committee.**C** C00484535

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2014

Transaction ID : SA11.7457

Amount of Each Receipt this Period

50.00

CONTRIBUTION

EARMARKED FROM MICHAEL PACYNA

Full Name (Last, First, Middle Initial)

**MR. EDWARD E. PETERS III**

Mailing Address P.O. BOX 110

City

TERRA ALTA

State

WV

Zip Code

26764-0110

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : SA11.7444

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. GEORGE S. PILATO**

Mailing Address 122 KELLER AVE.

City

FAYETTEVILLE

State

WV

Zip Code

25840-1224

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

SANSHELL PRODUCTS, INC.

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7515

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

1250.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**Full Name (Last, First, Middle Initial)  
**MR. JOHN R. POLAND**

A. Mailing Address 3001 FOX LANE

City	State	Zip Code
MORGANTOWN	WV	26508-3635

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JENMAR CORP.Occupation  
REG. SALES MANAGER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7492

Amount of Each Receipt this Period

750.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**MR. DAVID R. POLLITT**

Mailing Address 52 QUARRY RIDGE

City	State	Zip Code
CHARLESTON	WV	25304-1051

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ROWLAND LAND CO.Occupation  
OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		12		2014

Transaction ID : SA11.7382

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**MR. DAVID A. POTTER**

Mailing Address 125 EUCLID AVE.

City	State	Zip Code
WHEELING	WV	26003-5468

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
INVESTMENT ADVISOR

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2014

Transaction ID : SA11.7396

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1100.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM B. RANEY**

Mailing Address **3 CREEKSTONE RIDGE**

City **SOUTH CHARLESTON** State **WV** Zip Code **25309-8986**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

Transaction ID : SA11.7543

Amount of Each Receipt this Period

250.00
--------

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SCOTT REED**

Mailing Address **1 DAMIAN RD**

City **WHEELING** State **WV** Zip Code **26003-6005**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **ENGINEER**

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11.7616

Amount of Each Receipt this Period

1000.00
---------

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. BEVERLY P. REYNOLDS**

Mailing Address **P.O. BOX 3112**

City **PIKEVILLE** State **KY** Zip Code **41502-3112**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PATRIOT COAL CORPORATION** Occupation **VP OF SALES**

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

Transaction ID : SA11.7491

Amount of Each Receipt this Period

250.00
--------

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1500.00
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**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 43 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

 A. Full Name (Last, First, Middle Initial)  
**MR. DENNIS M. RICHARDS**  
 Mailing Address 101 YORKTOWN CT

City	State	Zip Code
BECKLEY	WV	25801-8368

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 JENMAR CORPORATION

 Occupation  
 ENGINEER

 Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7510

Amount of Each Receipt this Period

500.00

CONTRIBUTION

 B. Full Name (Last, First, Middle Initial)  
**MR S. DOUG RITCHIE**  
 Mailing Address 11 2ND AVENUE E

City	State	Zip Code
MURRAYSVILLE	WV	26164-5975

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 INFORMATION REQUESTED PER BEST EFFC

 Occupation  
 INFORMATION REQUESTED PER BEST EFF

 Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11.7599

Amount of Each Receipt this Period

50.00

CONTRIBUTION

 C. Full Name (Last, First, Middle Initial)  
**MR. JIM ROGERS**  
 Mailing Address P.O. BOX 162

City	State	Zip Code
PIKEVILLE	KY	41502-0162

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 ROGERS PETROLEUM

 Occupation  
 OWNER

 Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11.7625

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3150.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MR. CHARLES P. SAAD</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2014	
Mailing Address 2233 CHAPLINE ST		<b>Transaction ID : SA11.7394</b>	
City WHEELING	State WV	Zip Code 26003-3842	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>MR. MARK A. SADD</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2014	
Mailing Address 207 BEAUREGARD ST		<b>Transaction ID : SA11.7372</b>	
City CHARLESTON	State WV	Zip Code 25301-1920	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer LEWIS GLASSER CASEY AND ROLLINS	Occupation ATTORNEY		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>MR. PAUL SCHNAPP</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 11 / 2014	
Mailing Address 661 CARMEN MEADOWS DR.		<b>Transaction ID : SA11.7498</b>	
City BALLWIN	State MO	Zip Code 63021-8013	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer PATRIOT COAL CORPORATION	Occupation VP OF COMMERCIAL SERVICES		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		500.00	
<b>TOTAL</b> This Period (last page this line number only).....			

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 45 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD D. SHELBY**

Mailing Address 1119 INGLESIDE AVE

City State Zip Code  
MCLEAN VA 22101-2131

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAPITOL HILL CONSULTING GROUPOccupation  
OF COUNCIL

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11.7588

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM SIGNORELLI**

Mailing Address P.O. BOX 4314

City State Zip Code  
CHARLESTON WV 25364-4314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SECURITY AMERICA, INC.Occupation  
OWNER

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7567

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. LISA M. SIMON**

Mailing Address 65 STAMM CIRCLE

City State Zip Code  
WHEELING WV 26003-5542

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OHIO VALLEY HEALTH SVCS & EDUOccupation  
CHIEF FINANCIAL OFFICER

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11.7660

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

A. Full Name (Last, First, Middle Initial)  
**MR. SCOTT SMITH**

Mailing Address **2727 BRANDONVILLE PIKE**

City	State	Zip Code
TERRA ALTA	WV	26764-7053

FEC ID number of contributing federal political committee.

C

Name of Employer  
**GMS**

Occupation  
**VICE PRESIDENT OF SALES**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 11 / 2014

Transaction ID : SA11.7570

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**THOMAS SMITH**

Mailing Address **1086 WESTVIEW DR**

City	State	Zip Code
FAIRMONT	WV	26554-1444

FEC ID number of contributing federal political committee.

C

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 08 / 2014

Transaction ID : SA11.7423

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**DR. JOSEPH A. SNEAD**

Mailing Address **RT. 1, BOX 571 A**

City	State	Zip Code
MOUNT CLARE	WV	26408-9756

FEC ID number of contributing federal political committee.

C

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 05 / 2014

Transaction ID : SA11.7364

Amount of Each Receipt this Period

100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

850.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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PAGE 47 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

A. Full Name (Last, First, Middle Initial)  
**MR. LOUIS S. SOUTHWORTH II**  
 Mailing Address **P.O. BOX 553**

City State Zip Code  
**CHARLESTON WV 25322-0553**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 INFORMATION REQUESTED PER BEST EFF

Occupation  
 INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**250.00**

Date of Receipt

**06 / 11 / 2014**

Transaction ID : **SA11.7535**

Amount of Each Receipt this Period

**250.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**MR. NICHOLAS A. SPARACHANE**  
 Mailing Address **3 KENWOOD PLACE**

City State Zip Code  
**WHEELING WV 26003-6042**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**WELLS FARGO**

Occupation  
**COMMERCIAL INSURANCE BROKER**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**1000.00**

Date of Receipt

**06 / 30 / 2014**

Transaction ID : **SA11.7611**

Amount of Each Receipt this Period

**500.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**MR. ROBERT C. SPOERRI**  
 Mailing Address **851 W CHALMERS PL**

City State Zip Code  
**CHICAGO IL 60614-3233**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BENEFICIAL REUSE MANAGEMENT**

Occupation  
**EXECUTIVE**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**1500.00**

Date of Receipt

**06 / 30 / 2014**

Transaction ID : **SA11.7598**

Amount of Each Receipt this Period

**500.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1250.00**

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DANIEL C. STATLER**  
 Mailing Address 258 KAPPA DRIVE

City State Zip Code  
 PITTSBURGH PA 15238-2818

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 JENNMAR

Occupation  
 VP SALES

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 11 2014

Transaction ID : SA11.7516

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT M. STEPTOE, JR.**  
 Mailing Address 400 WHITEOAKS BLVD

City State Zip Code  
 BRIDGEPORT WV 26330-4500

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 STEPTOE & JOHNSON

Occupation  
 ATTORNEY

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 05 13 2014

Transaction ID : SA11.7388

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM R. STONE**  
 Mailing Address P.O. BOX 290

City State Zip Code  
 DANVILLE WV 25053-0290

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 J & R REPAIRS

Occupation  
 OWNER

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 11 2014

Transaction ID : SA11.7513

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**Full Name (Last, First, Middle Initial)  
**A. MS. PAMELA D. TARR**

Mailing Address 200 GEORGETOWN PLACE

City  
CHARLESTONState  
WVZip Code  
25314-1866FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JACKSON KELLY, PLLCOccupation  
ATTORNEY

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7490

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. JOHN L. THOMAS**

Mailing Address 1204 GREENMONT HILLS DR

City  
VIENNAState  
WVZip Code  
26105-3278FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TRI-STATE ROOFING & SHEET METALOccupation  
CONTRACTOR

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11.7593

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. WAYNE L. THOMAS**

Mailing Address PO BOX 2433

City  
ABINGDONState  
VAZip Code  
24212-2433FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JOY GLOBALOccupation  
STRATEGIC ALLIANCE MANAGER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7573

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 50 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**MR. RYAN TOLER**

Mailing Address 309 DOLARON LANE

City

SOUTH CHARLESTON

State

WV

Zip Code

25309-8108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PATRIOT COAL CORPORATION

Occupation

MANAGER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7533

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**LINDA R. TORRE**

Mailing Address 101 FLINTROCK RD

City

CHARLESTON

State

WV

Zip Code

25314-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DECOTA CONSULTING

Occupation

OWNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11.7629

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. HERBERT G. UNDERWOOD**

Mailing Address 600 KEMBERRY DR

City

BRIDGEPORT

State

WV

Zip Code

26330-1356

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2014

Transaction ID : SA11.7362

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. HERBERT G. UNDERWOOD**

Mailing Address 600 KEMBERRY DR

City State Zip Code  
BRIDGEPORT WV 26330-1356

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		08		2014

Transaction ID : SA11.7373

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD H. VERHEIJ**

Mailing Address 1486 CONTERA AVENUE

City State Zip Code  
SANTA BARBARA CA 93110-2452

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VERITAS CONSULTING, LLCOccupation  
ATTORNEY

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

Transaction ID : SA11.7526

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. GARY A. VINEYARD**

Mailing Address 114 SUMMIT RIDGE ROAD

City State Zip Code  
HURRICANE WV 25526-9211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ITOccupation  
PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

Transaction ID : SA11.7475

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**MS. FRANCES X. WEBB****A.**

Mailing Address P.O. BOX 146

City

SISTERSVILLE

State

WV

Zip Code

26175-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2014

**Transaction ID : SA11.7403**

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MS. KATHERINE F. WELLFORD****B.**

Mailing Address 1615 RIDHEVIEW RD

City

CHARLESTON

State

WV

Zip Code

25314-1620

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

**Transaction ID : SA11.7483**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. CHARLES WELLINGS****C.**

Mailing Address H.C. 68, BOX 3

City

WEST UNION

State

WV

Zip Code

26456-9009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

**Transaction ID : SA11.7467**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2050.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**Full Name (Last, First, Middle Initial)  
**MR. BRADLEY D. WHITE**

A. Mailing Address 4905 STAUTON AVE SE

City	State	Zip Code
CHARLESTON	WV	25304-2056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WHITE INSURANCE & ASSOCIATESOccupation  
OWNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7473

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**MR. WALTER L. WILLIAMS**

B. Mailing Address RR 1 BOX 456

City	State	Zip Code
CLARKSBURG	WV	26301-9761

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STEPTOE & JOHNSONOccupation  
ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2014

Transaction ID : SA11.7390

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**BRUCE WILSON**

C. Mailing Address 12 MOZART MEADOWS

City	State	Zip Code
WHEELING	WV	26003-7307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MAIN STREET BANKOccupation  
BANKING

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11.7613

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**MR. SAMUEL A. WINANS**

Mailing Address P.O. BOX 4374

City

PARKERSBURG

State

WV

Zip Code

26104-4374

FEC ID number of contributing federal political committee.

C

Name of Employer

WINANS SANITARY SUPPLY

Occupation

VICE PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	1	4

Transaction ID : SA11.7466

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MRS. CHERYL WONDERLY**

Mailing Address 13 STONE GATE DR

City

WHEELING

State

WV

Zip Code

26003-9339

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	4

Transaction ID : SA11.7348

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MS. ANGELA M. WOOLUM**

Mailing Address P.O. BOX 178

City

DELBARTON

State

WV

Zip Code

25670-0178

FEC ID number of contributing federal political committee.

C

Name of Employer

H-E PARTS MINING

Occupation

CUSTOMER SERVICE REP

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	1	4

Transaction ID : SA11.7518

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3850.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

A. Full Name (Last, First, Middle Initial)  
**MR. EDWARD J. ZWOLENSKY**

Mailing Address 30 HIDDEN VIEW DRIVE

City State Zip Code  
MOUNDSVILLE WV 26041-1378

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ZWOLENSKY & ASSOCIATESOccupation  
EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		05		2014

Transaction ID : SA11.7360

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**MR. EDWARD J. ZWOLENSKY**

Mailing Address 30 HIDDEN VIEW DRIVE

City State Zip Code  
MOUNDSVILLE WV 26041-1378

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ZWOLENSKY & ASSOCIATESOccupation  
EXECUTIVE

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

Transaction ID : SA11.7471

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

100.00

93900.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>SCALISE FOR CONGRESS</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	04		29		2014
M M	/	D D	/	Y Y Y Y									
04		29		2014									
Mailing Address 2900 CLEARVIEW PKWY, STE 206		<b>Transaction ID : SA11.7345</b>											
City METAIRIE	State LA	Zip Code 70006-6532											
FEC ID number of contributing federal political committee. <b>C</b> C00394957		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>2000.00</td> </tr> </table>						2000.00					
				2000.00									
Name of Employer 		Occupation 											
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>2500.00</td> </tr> </table>						2500.00					
				2500.00									
<b>B.</b> Full Name (Last, First, Middle Initial) <b>SCALISE FOR CONGRESS</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	04		29		2014
M M	/	D D	/	Y Y Y Y									
04		29		2014									
Mailing Address 2900 CLEARVIEW PKWY, STE 206		<b>Transaction ID : SA11.7346</b>											
City METAIRIE	State LA	Zip Code 70006-6532											
FEC ID number of contributing federal political committee. <b>C</b> C00394957		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>500.00</td> </tr> </table>						500.00					
				500.00									
Name of Employer 		Occupation 											
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>2500.00</td> </tr> </table>						2500.00					
				2500.00									
<b>C.</b> Full Name (Last, First, Middle Initial) <b>ACA INTERNATIONAL PAC</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>30</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	05		30		2014
M M	/	D D	/	Y Y Y Y									
05		30		2014									
Mailing Address 509 2ND ST NE		<b>Transaction ID : SA11.7432</b>											
City WASHINGTON	State DC	Zip Code 20002-7726											
FEC ID number of contributing federal political committee. <b>C</b> C00034785		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>1000.00</td> </tr> </table>						1000.00					
				1000.00									
Name of Employer 		Occupation 											
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>3500.00</td> </tr> </table>						3500.00					
				3500.00									
<b>SUBTOTAL</b> of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="4"></td> <td>3500.00</td> </tr> </table>						3500.00					
				3500.00									
<b>TOTAL</b> This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="4"></td> <td></td> </tr> </table>											

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AECOM US FEDERAL PAC**

Mailing Address 2101 WILSON BLVD STE 700

City	State	Zip Code
ARLINGTON	VA	22201-3060

FEC ID number of contributing federal political committee.

**C** C00374447

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2014

**Transaction ID : SA11.7602**

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ALPHA NATURAL RESOURCES PAC**

Mailing Address 1301 PENNSYLVANIA AVE. STE. 404

City	State	Zip Code
WASHINGTON	DC	20004-1730

FEC ID number of contributing federal political committee.

**C** C00348524

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 11 / 2014

**Transaction ID : SA11.7561**

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN ACADEMY OF OPHTHALMOLOGY PAC**

Mailing Address 1101 VERMONT AVE. NW, STE. 700

City	State	Zip Code
WASHINGTON	DC	20005-3526

FEC ID number of contributing federal political committee.

**C** C00196246

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 08 / 2014

**Transaction ID : SA11.7374**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

5000.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**AMERICAN ACADEMY OF DERMATOLOGY ASSN. PAC(SKINPAC)**

Mailing Address 1445 NEW YORK AVE NW, STE 800

City  
WASHINGTONState  
DCZip Code  
20005-2125FEC ID number of contributing  
federal political committee.

C C00359539

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2014

Transaction ID : SA11.7375

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**AMERICAN COLLEGE OF RADIOLOGY ASSOC PAC**

Mailing Address 1891 PRESTON WHITE DR

City  
RESTONState  
VAZip Code  
20191-4326FEC ID number of contributing  
federal political committee.

C C00343459

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

8000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2014

Transaction ID : SA11.7582

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**AMERICAN COLLEGE OF RHEUMATOLOGY(RHEUMPAC)**

Mailing Address 2200 LAKE BOULEVARD NE

City  
ATLANTAState  
GAZip Code  
30319-5310FEC ID number of contributing  
federal political committee.

C C00432823

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11.7634

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**McKinley for Congress**
**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN ELECTRIC POWER PAC**

Mailing Address 1 RIVERSIDE PLZ

City	State	Zip Code
COLUMBUS	OH	43215-2355

FEC ID number of contributing federal political committee.

C C00096842

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		07		2014

Transaction ID : SA11.7366

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN GAS ASSOCIATION PAC (GASPAC)**

Mailing Address 400 N CAPITOL ST NW

City	State	Zip Code
WASHINGTON	DC	20001-1511

FEC ID number of contributing federal political committee.

C C00007450

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11.7592

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN MEDICAL ASSOCIATION PAC**

Mailing Address 25 MASSACHUSETTS AVE NW, STE 600

City	State	Zip Code
WASHINGTON	DC	20001-7400

FEC ID number of contributing federal political committee.

C C00000422

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		09		2014

Transaction ID : SA11.7376

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

4000.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**AMERICAN PETROLEUM INSTITUTE PAC**

Mailing Address 1220 L ST. NW

City

WASHINGTON

State

DC

Zip Code

20005-4018

FEC ID number of contributing  
federal political committee.**C** C00483677

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		03		2014

Transaction ID : SA11.7354

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**AMERICAN PUBLIC POWER ASSOC PUBLIC OWNERSHIP OF ELECTRIC RES**

Mailing Address 1875 CONNECTICUT AVE NW, STE 1200

City

WASHINGTON

State

DC

Zip Code

20009-5715

FEC ID number of contributing  
federal political committee.**C** C00161570

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2014

Transaction ID : SA11.7453

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**AMERICAN PRINCIPLES**

Mailing Address 20533 BISCAYNE BLVD #250

City

MIAMI

State

FL

Zip Code

33180-1529

FEC ID number of contributing  
federal political committee.**C** C00492579

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11.7637

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

2000.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**AMERICAN SOC OF ANESTHESIOLOGISTS PAC**

Mailing Address 520 N NORTHWEST HWY

City

PARK RIDGE

State

IL

Zip Code

60068-2538

FEC ID number of contributing  
federal political committee.

**C** C00255752

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 13 / 2014

Transaction ID : SA11.7456

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**ARCH PAC**

Mailing Address 1 CITY PLACE DR.

City

ST. LOUIS

State

MO

Zip Code

63141-7014

FEC ID number of contributing  
federal political committee.

**C** C00167668

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2014

Transaction ID : SA11.7633

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**BIOMARIN PHARMACEUTICAL PAC**

Mailing Address 2350 KERNER BLVD STE 250

City

SAN RAFAEL

State

CA

Zip Code

94901-5596

FEC ID number of contributing  
federal political committee.

**C** C00543371

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2014

Transaction ID : SA11.7636

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**BOILERMAKERS-BLACKSMITHS PAC**

Mailing Address 753 STATE AVE, STE 565

City  
KANSAS CITYState  
KSZip Code  
66101-2511FEC ID number of contributing  
federal political committee.**C** C00005157

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 07 / 2014

Transaction ID : SA11.7368

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**BRAIN PAC-AMERICAN ACADEMY OF NEUROLOGY**

Mailing Address 201 CHICAGO AVE

City  
MINNEAPOLISState  
MNZip Code  
55415-1126FEC ID number of contributing  
federal political committee.**C** C00435933

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 13 / 2014

Transaction ID : SA11.7454

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**BUILD PAC**

Mailing Address 1201 15TH ST. NW

City  
WASHINGTONState  
DCZip Code  
20005-2899FEC ID number of contributing  
federal political committee.**C** C00000901

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 13 / 2014

Transaction ID : SA11.7421

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BURGER KING FRANCHISEE PAC**

Mailing Address 1701 BARRETT LAKES BLVD. NW  
 STE. 180

City State Zip Code  
 KENNESAW GA 30144-4561

FEC ID number of contributing  
federal political committee.

**C** C00329425

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 23 2014

**Transaction ID : SA11.7586**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CHARAH INC. PAC**

Mailing Address 12601 PLANTSIDE DR.

City State Zip Code  
 LOUISVILLE KY 40299-6386

FEC ID number of contributing  
federal political committee.

**C** C00547703

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 23 2014

**Transaction ID : SA11.7587**

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CLIFFS NATIONAL RESOURCES INC. PAC**

Mailing Address 200 PUBLIC SQUARE, SUITE 3300

City State Zip Code  
 CLEVELAND OH 44114-2315

FEC ID number of contributing  
federal political committee.

**C** C00039016

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 11 2014

**Transaction ID : SA11.7563**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. CMS ENERGY EMPLOYEES FOR BETTER GOV'T**

Mailing Address 1 ENERGY PLAZA DR

City	State	Zip Code
JACKSON	MI	49201-2357

FEC ID number of contributing federal political committee.

**C** C00075473

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2014

Transaction ID : SA11.7584

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. DIRECTV GROUP, INC. FUND(DIRECTV PAC)**

Mailing Address 901 F ST NW, STE 600

City	State	Zip Code
WASHINGTON	DC	20004-1429

FEC ID number of contributing federal political committee.

**C** C00331991

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2014

Transaction ID : SA11.7347

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. DOMINION POLITICAL ACTION COMMITTEE**

Mailing Address P.O. BOX 26666

City	State	Zip Code
RICHMOND	VA	23261-6666

FEC ID number of contributing federal political committee.

**C** C00108209

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

8600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2014

Transaction ID : SA11.7367

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

5500.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress****A.** Full Name (Last, First, Middle Initial)  
**DTE ENERGY CO PAC FEDERAL**

Mailing Address 1 ENERGY PLAZA

City	State	Zip Code
DETROIT	MI	48226-1221

FEC ID number of contributing  
federal political committee.**C** C00081547

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		28		2014

**Transaction ID : SA11.7342**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DUKE ENERGY CORPORATION PAC**

Mailing Address 550 S TRYON ST, DEC37D

City	State	Zip Code
CHARLOTTE	NC	28202-4200

FEC ID number of contributing  
federal political committee.**C** C00083535

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

**Transaction ID : SA11.7452**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**EASTMAN PAC**

Mailing Address PO BOX 431

City	State	Zip Code
KINGSPORT	TN	37662-0431

FEC ID number of contributing  
federal political committee.**C** C00113159

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		03		2014

**Transaction ID : SA11.7356**

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

4000.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

A. Full Name (Last, First, Middle Initial)  
**EXXON MOBIL CORP. PAC**  
Mailing Address 5959 LAS COLINAS BLVD

City State Zip Code  
IRVING TX 75039-4202

FEC ID number of contributing  
federal political committee.

C C00121368

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

8000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 30 2014

Transaction ID : SA11.7632

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**FLETCHER PAC**  
Mailing Address 402 HIGH STREET

City State Zip Code  
HUNTINGTON WV 25705-1747

FEC ID number of contributing  
federal political committee.

C C00496257

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 11 2014

Transaction ID : SA11.7562

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**FRATERNITY & SORORITY PAC**  
Mailing Address P.O. BOX 3435

City State Zip Code  
ALEXANDRIA VA 22302-0435

FEC ID number of contributing  
federal political committee.

C C00410068

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 13 2014

Transaction ID : SA11.7455

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

8500.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>HEADWATERS INC PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2014	
Mailing Address 10653 RIVER FRONT PKWY STE 300		<b>Transaction ID : SA11.7581</b>	
City SOUTH JORDAN	State UT	Zip Code 84095-3529	Amount of Each Receipt this Period 2000.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C C00388751			
Name of Employer	Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>HONEYWELL PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 04 / 2014	
Mailing Address 101 CONSTITUTION AVE NW, STE 500 W		<b>Transaction ID : SA11.7438</b>	
City WASHINGTON	State DC	Zip Code 20001-2133	Amount of Each Receipt this Period 2000.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C C00096156			
Name of Employer	Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>INTERNATIONAL UNION OF OPERATING ENGINEERS PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 04 / 2014	
Mailing Address 1125 SEVENTEENTH STREET, NW		<b>Transaction ID : SA11.7449</b>	
City WASHINGTON	State DC	Zip Code 20036-4709	Amount of Each Receipt this Period 2500.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C C00029504			
Name of Employer	Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10000.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		6500.00	
<b>TOTAL</b> This Period (last page this line number only).....			

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**JOY GLOBAL, INC. PAC**

Mailing Address P.O. BOX 554

City

MILWAUKEE

State

WI

Zip Code

53201-0554

FEC ID number of contributing  
federal political committee.

C C00334581

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

Transaction ID : SA11.7558

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**KOCHPAC**

Mailing Address 600 14TH ST NW, STE 800

City

WASHINGTON

State

DC

Zip Code

20005-2099

FEC ID number of contributing  
federal political committee.

C C00236489

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2014

Transaction ID : SA11.7437

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**LOCKHEED MARTIN EMPLOYEES' PAC**

Mailing Address 2121 CRYSTAL DR, STE 100

City

ARLINGTON

State

VA

Zip Code

22202-3706

FEC ID number of contributing  
federal political committee.

C C00303024

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

6000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11.7601

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

2500.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

A. Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLLERS PAC**

Mailing Address 1325 MASSACHUSETTS AVE NW

City	State	Zip Code
WASHINGTON	DC	20005-4171

FEC ID number of contributing  
federal political committee.

**C** C00238725

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2014

Transaction ID : SA11.7590

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLLERS PAC**

Mailing Address 1325 MASSACHUSETTS AVE NW

City	State	Zip Code
WASHINGTON	DC	20005-4171

FEC ID number of contributing  
federal political committee.

**C** C00238725

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2014

Transaction ID : SA11.7591

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**NATIONAL BEER WHOLESALERS ASSOC. PAC**

Mailing Address 1101 KING ST, STE 600

City	State	Zip Code
ALEXANDRIA	VA	22314-2965

FEC ID number of contributing  
federal political committee.

**C** C00144766

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 01 / 2014

Transaction ID : SA11.7351

Amount of Each Receipt this Period

3000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**Full Name (Last, First, Middle Initial)  
**A. NATIONAL CABLE AND TELECOMMUNICATIONS ASSOC. PAC (NCTA PAC)**

Mailing Address 25 MASSACHUSETTS AVE NW STE 100

City	State	Zip Code
WASHINGTON	DC	20001-1434

FEC ID number of contributing  
federal political committee.**C** C00010082

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		13		2014

**Transaction ID : SA11.7428**

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. NATIONAL EMERGENCY MEDICINE PAC**

Mailing Address P.O. BOX 619911

City	State	Zip Code
DALLAS	TX	75261-9911

FEC ID number of contributing  
federal political committee.**C** C00140061

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

8000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		13		2014

**Transaction ID : SA11.7420**

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. NATIONAL MULTI HOUSING COUNCIL PAC-NMHC PAC**

Mailing Address 1850 M ST NW, STE 540

City	State	Zip Code
WASHINGTON	DC	20036-5816

FEC ID number of contributing  
federal political committee.**C** C00130773

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		01		2014

**Transaction ID : SA11.7352**

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

8500.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NFIB SAFE TRUST**  
Mailing Address 1201 F ST NW, STE 200

City State Zip Code  
WASHINGTON DC 20004-1221

FEC ID number of contributing  
federal political committee.

**C** C00101105

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 10 2014

**Transaction ID : SA11.7378**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NISOURCE INC. PAC**  
Mailing Address 200 CIVIC CENTER DR

City State Zip Code  
COLUMBUS OH 43215-4138

FEC ID number of contributing  
federal political committee.

**C** C00051979

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 04 2014

**Transaction ID : SA11.7439**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NOBLE ENERGY PAC**  
Mailing Address 100 GLENBOROUGH DR STE 100

City State Zip Code  
HOUSTON TX 77067-3618

FEC ID number of contributing  
federal political committee.

**C** C00479873

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 04 2014

**Transaction ID : SA11.7445**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>NOVO NORDISK INC. PAC</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>09</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		09		2014
M M	/	D D	/	Y Y Y Y								
06		09		2014								
Mailing Address 1155 F ST. NW STE. 1150		<b>Transaction ID : SA11.7458</b>										
City WASHINGTON	State DC	Zip Code 20004-1351										
FEC ID number of contributing federal political committee. <b>C</b> C00424838		Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00									
1000.00												
Name of Employer	Occupation	CONTRIBUTION										
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00										
1000.00												

<b>B.</b> Full Name (Last, First, Middle Initial) <b>NUCLEAR ENERGY INSTITUTE FEDERAL PAC</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>10</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	05		10		2014
M M	/	D D	/	Y Y Y Y								
05		10		2014								
Mailing Address 1201 F ST NW, STE 1100		<b>Transaction ID : SA11.7379</b>										
City WASHINGTON	State DC	Zip Code 20004-1218										
FEC ID number of contributing federal political committee. <b>C</b> C00239848		Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00									
1000.00												
Name of Employer	Occupation	CONTRIBUTION										
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>2000.00</td> </tr> </table>	2000.00										
2000.00												

<b>C.</b> Full Name (Last, First, Middle Initial) <b>OB-GYN PAC THE MULTI-CANDIDATE COMMITTEE OF THE AMERICAN CON</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>04</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		04		2014
M M	/	D D	/	Y Y Y Y								
06		04		2014								
Mailing Address 409 12TH ST SW		<b>Transaction ID : SA11.7451</b>										
City WASHINGTON	State DC	Zip Code 20024-2125										
FEC ID number of contributing federal political committee. <b>C</b> C00364158		Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00									
1000.00												
Name of Employer	Occupation	CONTRIBUTION										
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00										
1000.00												

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<table border="1"> <tr> <td>3000.00</td> </tr> </table>	3000.00
3000.00		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

A. Full Name (Last, First, Middle Initial)  
**PAC OF THE AMERICAN ASSOC. OF ORTHOPAEDIC SURGEONS**

Mailing Address 317 MASSACHUSETTS AVE. NE

City	State	Zip Code
WASHINGTON	DC	20002-5769

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 5000.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 03 / 2014

Transaction ID : SA11.7353

Amount of Each Receipt this Period

1000.00
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CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**PATRIOT COAL CORPORATION PAC**

Mailing Address 12312 OLIVE BOULEVARD, SUITE 400

City	State	Zip Code
SAINT LOUIS	MO	63141-6448

FEC ID number of contributing federal political committee. **C** C00452524

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 4500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 11 / 2014

Transaction ID : SA11.7560

Amount of Each Receipt this Period

2500.00
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CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**POWERPAC OF THE EDISON ELECTRIC INSTITUTE**

Mailing Address 701 PENNSYLVANIA AVE

City	State	Zip Code
WASHINGTON	DC	20004-2608

FEC ID number of contributing federal political committee. **C** C00095869

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 3000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 11 / 2014

Transaction ID : SA11.7559

Amount of Each Receipt this Period

1000.00
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CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4500.00
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# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PPL PEOPLE FOR GOOD GOVT PAC**

Mailing Address 2 N 9TH ST

City	State	Zip Code
ALLENTOWN	PA	18101-1139

FEC ID number of contributing  
federal political committee.

**C** C00228106

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2014

Transaction ID : SA11.7440

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**REAL ESTATE ROUNDTABLE PAC (REALPAC)**

Mailing Address 801 PENNSYLVANIA AVE NW, STE 720

City	State	Zip Code
WASHINGTON	DC	20004-2686

FEC ID number of contributing  
federal political committee.

**C** C00033779

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		03		2014

Transaction ID : SA11.7355

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**REALTORS PAC**

Mailing Address 430 N MICHIGAN AVE

City	State	Zip Code
CHICAGO	IL	60611-4011

FEC ID number of contributing  
federal political committee.

**C** C00030718

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		13		2014

Transaction ID : SA11.7419

Amount of Each Receipt this Period

4000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**REPUBLICAN MAIN STREET PAC**

Mailing Address 1220 L STREET NW, STE. 100-263

City

WASHINGTON

State

DC

Zip Code

20005-4018

FEC ID number of contributing federal political committee.

**C** C00165159

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 09 / 2014

Transaction ID : SA11.7377

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**REPUBLICAN MAIN STREET PAC**

Mailing Address 1220 L STREET NW, STE. 100-263

City

WASHINGTON

State

DC

Zip Code

20005-4018

FEC ID number of contributing federal political committee.

**C** C00165159

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 23 / 2014

Transaction ID : SA11.7585

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**SOUTHERN COMPANY EMPLOYEES PAC**

Mailing Address 241 RALPH MCGILL BLVD. NE

City

ATLANTA

State

GA

Zip Code

30308-3374

FEC ID number of contributing federal political committee.

**C** C00144774

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2014

Transaction ID : SA11.7603

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

3000.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TEPAC**

Mailing Address 702 N FRANKLIN ST

City State Zip Code  
TAMPA FL 33602-4429

FEC ID number of contributing federal political committee. **C** C00161422

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		23		2014

Transaction ID : SA11.7583

Amount of Each Receipt this Period

500.00
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CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**THE DOW CHEMICAL COMPANY EMPLOYEES PAC(DOWPAC)**

Mailing Address 2030 DOW CENTER

City State Zip Code  
MIDLAND MI 48674-1500

FEC ID number of contributing federal political committee. **C** C00074096

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : SA11.7450

Amount of Each Receipt this Period

1000.00
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CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**TREASURY EMPLOYEES PAC**

Mailing Address 1750 H ST NW

City State Zip Code  
WASHINGTON DC 20006-4600

FEC ID number of contributing federal political committee. **C** C00107128

Name of Employer Occupation

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11.7635

Amount of Each Receipt this Period

1000.00
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CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2500.00
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**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**TUESDAY GROUP PAC**

Mailing Address P.O. BOX 11586

City

WASHINGTON

State

DC

Zip Code

20008-0786

FEC ID number of contributing  
federal political committee.**C** C00433060

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11.7589

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**WALTER ENERGY INC FEDERAL PAC**

Mailing Address 3000 RIVERCHASE GALLERIA STE 1700

City

BIRMINGHAM

State

AL

Zip Code

35244-2378

FEC ID number of contributing  
federal political committee.**C** C00508341

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11.7564

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**WASTE MANAGEMENT PAC**

Mailing Address 701 PENNSYLVANIA AVE NW STE 590

City

WASHINGTON

State

DC

Zip Code

20004-3610

FEC ID number of contributing  
federal political committee.**C** C00119008

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11.7604

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

8500.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**WINE AND SPIRITS WHOLESALERS PAC**

Mailing Address 805 15TH ST NW, STE 430

City

WASHINGTON

State

DC

Zip Code

20005-2273

FEC ID number of contributing federal political committee.

**C** C00147173

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 13 / 2014

Transaction ID : SA11.7427

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B.**  
Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**  
Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

105000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. WOOD COUNTY REPUBLICAN EXECUTIVE COMMITTEE**

Mailing Address 500 55TH ST

City	State	Zip Code
VIENNA	WV	26501

Purpose of Disbursement  
EVENT TICKETS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2014

Amount of Each Disbursement this Period

80.00
-------

Transaction ID : SB17.I1050

**B. ANGIE CORDELL**

Mailing Address 503 57TH ST

City	State	Zip Code
VIENNA	WV	26105

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

832.83
--------

Transaction ID : SB17.I1014

**C. ANGIE CORDELL**

Mailing Address 503 57TH ST

City	State	Zip Code
VIENNA	WV	26105

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

Amount of Each Disbursement this Period

832.82
--------

Transaction ID : SB17.I1030

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1745.65

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 80 OF 117

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. ANGIE CORDELL**

Mailing Address 503 57TH ST

City	State	Zip Code
VIENNA	WV	26105

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2014

Amount of Each Disbursement this Period

832.83
--------

Transaction ID : SB17.I1041

**B. ANGIE CORDELL**

Mailing Address 503 57TH ST

City	State	Zip Code
VIENNA	WV	26105

Purpose of Disbursement  
SEE MEMO

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

121.86
--------

Transaction ID : SB17.I978

**C. ANGIE CORDELL**

Mailing Address 503 57TH ST

City	State	Zip Code
VIENNA	WV	26105

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

88.56
-------

Transaction ID : SB17.I979

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

954.69

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. OFFICE DEPOT**

Mailing Address 6600 N MILITARY TRL

City	State	Zip Code
BOCA RATON	FL	33496

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

967.16
--------

Transaction ID : SB17.I980

[MEMO ITEM]

**B. WALMART**

Mailing Address 702 SW 8TH ST

City	State	Zip Code
BENTONVILLE	AR	72716

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

19.97
-------

Transaction ID : SB17.I981

[MEMO ITEM]

**C. BROCK DENSEL**

Mailing Address 5000 HAMPTON CENTER, STE 3

City	State	Zip Code
MORGANTOWN	WV	26505

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2014

Amount of Each Disbursement this Period

967.16
--------

Transaction ID : SB17.I1012

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

967.16

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 82 OF 117

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. BROCK DENSEL**

Mailing Address 5000 HAMPTON CENTER, STE 3

City	State	Zip Code
MORGANTOWN	WV	26505

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 30 / 2014

Amount of Each Disbursement this Period

967.17
--------

Transaction ID : SB17.I1013

**B. BROCK DENSEL**

Mailing Address 5000 HAMPTON CENTER, STE 3

City	State	Zip Code
MORGANTOWN	WV	26505

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 13 / 2014

Amount of Each Disbursement this Period

967.16
--------

Transaction ID : SB17.I1031

**C. BROCK DENSEL**

Mailing Address 5000 HAMPTON CENTER, STE 3

City	State	Zip Code
MORGANTOWN	WV	26505

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 26 / 2014

Amount of Each Disbursement this Period

967.17
--------

Transaction ID : SB17.I1042

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2901.50

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 83 OF 117

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. BROCK DENSEL**

Mailing Address 5000 HAMPTON CENTER, STE 3

City	State	Zip Code
MORGANTOWN	WV	26505

Purpose of Disbursement  
SEE MEMO

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

387.90
--------

Transaction ID : SB17.I982

**B. BROCK DENSEL**

Mailing Address 5000 HAMPTON CENTER, STE 3

City	State	Zip Code
MORGANTOWN	WV	26505

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

367.92
--------

Transaction ID : SB17.I983

[MEMO ITEM]

**C. CONGRESSMA CHARLES DENT**

Mailing Address 1009 LONGWORTH HOB

City	State	Zip Code
WASHINGTON	DC	20515

Purpose of Disbursement  
MEMBERSHIP DUES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2014

Amount of Each Disbursement this Period

200.00
--------

Transaction ID : SB17.I951

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

587.90

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 84 OF 117

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**Full Name (Last, First, Middle Initial)  
**A. MR. F. TOM GRAFF, JR.**

Mailing Address P.O. BOX 1386

City State Zip Code  
CHARLESTON WV 25325-1386Purpose of Disbursement  
IN-KIND CONTRIBUTION

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2014 ☐ Primary ☒ General ☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2014

Amount of Each Disbursement this Period

300.00
--------

Transaction ID : SB17.7638

EVENT CATERING

Full Name (Last, First, Middle Initial)  
**B. COLEBY MATHEWS**

Mailing Address 61225 WEBB HEIGHTS RD

City State Zip Code  
SHADYSIDE OH 43947Purpose of Disbursement  
SALARY

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

832.83
--------

Transaction ID : SB17.I1015

Full Name (Last, First, Middle Initial)  
**C. COLEBY MATHEWS**

Mailing Address 61225 WEBB HEIGHTS RD

City State Zip Code  
SHADYSIDE OH 43947Purpose of Disbursement  
SALARY

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

Amount of Each Disbursement this Period

832.82
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Transaction ID : SB17.I1032

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1965.65

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 85 OF 117

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. COLEBY MATHEWS**

Mailing Address 61225 WEBB HEIGHTS RD

City	State	Zip Code
SHADYSIDE	OH	43947

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 26 / 2014

Amount of Each Disbursement this Period

832.83
--------

Transaction ID : SB17.I1043

**B. COLEBY MATHEWS**

Mailing Address 61225 WEBB HEIGHTS RD

City	State	Zip Code
SHADYSIDE	OH	43947

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 02 / 2014

Amount of Each Disbursement this Period

118.80
--------

Transaction ID : SB17.I984

**C. AMY MCKINLEY**

Mailing Address 3204 ILLINOIS LN

City	State	Zip Code
BELLINGHAM	WA	98226

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 05 / 2014

Amount of Each Disbursement this Period

3000.00
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Transaction ID : SB17.I957

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3951.63

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 86 OF 117

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. AMY MCKINLEY**

Mailing Address 3204 ILLINOIS LN

City	State	Zip Code
BELLINGHAM	WA	98226

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 02 / 2014

Amount of Each Disbursement this Period

3000.00
---------

Transaction ID : SB17.I998

**B. MARY MCKINLEY**

Mailing Address 147 BETHANY PIKE

City	State	Zip Code
WHEELING	WV	26003

Purpose of Disbursement  
SEE MEMO

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 02 / 2014

Amount of Each Disbursement this Period

7851.83
---------

Transaction ID : SB17.I985

**C. BENCHMARK E-MAIL**

Mailing Address 10621 CALLE LE

City	State	Zip Code
LOS ALAMITOS	CA	90720

Purpose of Disbursement  
E-MARKETING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 02 / 2014

Amount of Each Disbursement this Period

236.85
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Transaction ID : SB17.I986

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

10851.83
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 87 OF 117

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. DUNBAR PRINTING & GRAPHICS LLC**

Mailing Address 1310 OHIO AVE

City	State	Zip Code
DUNBAR	WV	25064

Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

7614.98
---------

Transaction ID : SB17.I987

**[MEMO ITEM]****B. THOMAS MIDANEK**

Mailing Address 5000 HAMPTON CENTER, STE 3

City	State	Zip Code
MORGANTOWN	WV	26505

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

Amount of Each Disbursement this Period

3491.52
---------

Transaction ID : SB17.I1006

**C. THOMAS MIDANEK**

Mailing Address 5000 HAMPTON CENTER, STE 3

City	State	Zip Code
MORGANTOWN	WV	26505

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2014

Amount of Each Disbursement this Period

1745.76
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Transaction ID : SB17.I1007

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5237.28

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

<b>A. THOMAS MIDANEK</b> Full Name (Last, First, Middle Initial)				Date of Disbursement <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y 05 / 30 / 2014</div> </div>	
Mailing Address 5000 HAMPTON CENTER, STE 3				Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">1745.76</div>	
City MORGANTOWN State WV Zip Code 26505		Purpose of Disbursement SALARY		Transaction ID : SB17.I1008	
Candidate Name		Category/ Type		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		Full Name (Last, First, Middle Initial)			
<b>B. THOMAS MIDANEK</b>				Date of Disbursement <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y 06 / 13 / 2014</div> </div>	
Mailing Address 5000 HAMPTON CENTER, STE 3				Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">1745.76</div>	
City MORGANTOWN State WV Zip Code 26505		Purpose of Disbursement SALARY		Transaction ID : SB17.I1033	
Candidate Name		Category/ Type		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		Full Name (Last, First, Middle Initial)			
<b>C. THOMAS MIDANEK</b>				Date of Disbursement <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y 06 / 26 / 2014</div> </div>	
Mailing Address 5000 HAMPTON CENTER, STE 3				Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">1745.76</div>	
City MORGANTOWN State WV Zip Code 26505		Purpose of Disbursement SALARY		Transaction ID : SB17.I1044	
Candidate Name		Category/ Type		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		Full Name (Last, First, Middle Initial)			
<b>SUBTOTAL</b> of Disbursements This Page (optional).....				<div style="border: 1px solid black; padding: 2px; text-align: right;">5237.28</div>	
<b>TOTAL</b> This Period (last page this line number only).....				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 89 OF 117

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

<b>A. THOMAS MIDANEK</b> Full Name (Last, First, Middle Initial)				Date of Disbursement <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y 05 / 12 / 2014</div> </div>	
Mailing Address 5000 HAMPTON CENTER, STE 3				Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">2769.64</div>	
City MORGANTOWN State WV Zip Code 26505		Purpose of Disbursement SEE MEMO		<div style="border: 1px solid black; width: 50px; height: 20px; margin: 0 auto;"></div>	
Candidate Name		Category/ Type		<b>Transaction ID : SB17.I959</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:					
<b>B. THOMAS MIDANEK</b> Full Name (Last, First, Middle Initial)				Date of Disbursement <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y 05 / 12 / 2014</div> </div>	
Mailing Address 5000 HAMPTON CENTER, STE 3				Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">270.00</div>	
City MORGANTOWN State WV Zip Code 26505		Purpose of Disbursement MILEAGE REIMBURSEMENT		<div style="border: 1px solid black; width: 50px; height: 20px; margin: 0 auto;"></div>	
Candidate Name		Category/ Type		<b>Transaction ID : SB17.I960</b>  <b>[MEMO ITEM]</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:					
<b>C. NATION BUILDER</b> Full Name (Last, First, Middle Initial)				Date of Disbursement <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y 05 / 12 / 2014</div> </div>	
Mailing Address 448 S HILL ST, STE 200				Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">48.00</div>	
City LOS ANGELES State CA Zip Code 90013		Purpose of Disbursement WEB HOSTING		<div style="border: 1px solid black; width: 50px; height: 20px; margin: 0 auto;"></div>	
Candidate Name		Category/ Type		<b>Transaction ID : SB17.I966</b>  <b>[MEMO ITEM]</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:					
<b>SUBTOTAL</b> of Disbursements This Page (optional).....				<div style="border: 1px solid black; padding: 2px; text-align: right;">2769.64</div>	
<b>TOTAL</b> This Period (last page this line number only).....				<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 90 OF 117

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. OFFICE DEPOT**

Mailing Address 6600 N MILITARY TRL

City	State	Zip Code
BOCA RATON	FL	33496

Purpose of Disbursement  
OFFICE EQUIPMENT/SUPPLIES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 12 / 2014

Amount of Each Disbursement this Period

1225.67
---------

Transaction ID : SB17.I963

[MEMO ITEM]

**B. UPS**

Mailing Address 55 GLENLAKE PKWY NE

City	State	Zip Code
ATLANTA	GA	30328

Purpose of Disbursement  
SHIPPING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 12 / 2014

Amount of Each Disbursement this Period

156.14
--------

Transaction ID : SB17.I964

[MEMO ITEM]

**c. USPS**

Mailing Address 2501 CHAPLINE ST

City	State	Zip Code
WHEELING	WV	26003

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 12 / 2014

Amount of Each Disbursement this Period

420.00
--------

Transaction ID : SB17.I965

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. WALMART**

Mailing Address 702 SW 8TH ST

City	State	Zip Code
BENTONVILLE	AR	72716

Purpose of Disbursement  
OFFICE EQUIPMENT

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 12 / 2014

Amount of Each Disbursement this Period

315.88
--------

Transaction ID : SB17.I961

**[MEMO ITEM]****B. THOMAS MIDANEK**

Mailing Address 5000 HAMPTON CENTER, STE 3

City	State	Zip Code
MORGANTOWN	WV	26505

Purpose of Disbursement  
SEE MEMO

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 02 / 2014

Amount of Each Disbursement this Period

3018.44
---------

Transaction ID : SB17.I988

**C. THOMAS MIDANEK**

Mailing Address 5000 HAMPTON CENTER, STE 3

City	State	Zip Code
MORGANTOWN	WV	26505

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 02 / 2014

Amount of Each Disbursement this Period

112.32
--------

Transaction ID : SB17.I989

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3018.44
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. AMAZON**

Mailing Address 1516 2ND AVE

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement  
OFFICE EQUIPMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

978.24
--------

Transaction ID : SB17.I992

[MEMO ITEM]

**B. AT&T**

Mailing Address 208 S AKARD ST

City DALLAS State TX Zip Code 75202

Purpose of Disbursement  
TELEPHONE SERVICE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

167.00
--------

Transaction ID : SB17.I993

[MEMO ITEM]

**C. GOT PRINT**

Mailing Address 7625 N SAN FERNANDO RD

City BURBANK State CA Zip Code 91505

Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

312.59
--------

Transaction ID : SB17.I994

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 93 OF 117

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. NATION BUILDER**

Mailing Address 448 S HILL ST, STE 200

City	State	Zip Code
LOS ANGELES	CA	90013

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

141.00
--------

Transaction ID : SB17.I995

**[MEMO ITEM]****B. WALMART**

Mailing Address 702 SW 8TH ST

City	State	Zip Code
BENTONVILLE	AR	72716

Purpose of Disbursement  
OFFICE EQUIPMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

825.36
--------

Transaction ID : SB17.I990

**[MEMO ITEM]****C. SAMANTHA WALDRON**

Mailing Address 411 PINNACLE HEIGHTS

City	State	Zip Code
MORGANTOWN	WV	26505

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

Amount of Each Disbursement this Period

1046.30
---------

Transaction ID : SB17.I1009

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1046.30

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 94 OF 117

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress****A. SAMANTHA WALDRON**

Full Name (Last, First, Middle Initial)

Mailing Address 411 PINNACLE HEIGHTS

City State Zip Code  
MORGANTOWN WV 26505Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2014

Amount of Each Disbursement this Period

584.56
--------

Transaction ID : SB17.I1010

**B. SAMANTHA WALDRON**

Full Name (Last, First, Middle Initial)

Mailing Address 411 PINNACLE HEIGHTS

City State Zip Code  
MORGANTOWN WV 26505Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

584.55
--------

Transaction ID : SB17.I1011

**C. SAMANTHA WALDRON**

Full Name (Last, First, Middle Initial)

Mailing Address 411 PINNACLE HEIGHTS

City State Zip Code  
MORGANTOWN WV 26505Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

Amount of Each Disbursement this Period

584.56
--------

Transaction ID : SB17.I1034

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1753.67

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 95 OF 117

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress****A. SAMANTHA WALDRON**

Full Name (Last, First, Middle Initial)

Mailing Address 411 PINNACLE HEIGHTS

City State Zip Code  
MORGANTOWN WV 26505Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
06	26	2014

Amount of Each Disbursement this Period

584.55
--------

Transaction ID : SB17.I1045

**B. ACQUIRE DIGITAL**

Full Name (Last, First, Middle Initial)

Mailing Address 113A 17TH AVE S

City State Zip Code  
NASHVILLE TN 37203Purpose of Disbursement  
ADVERTISING/WEB DEVELOPMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
06	02	2014

Amount of Each Disbursement this Period

11000.00
----------

Transaction ID : SB17.I977

**C. BRIDGE ROAD BISTRO**

Full Name (Last, First, Middle Initial)

Mailing Address 915 BRIDGE RD

City State Zip Code  
CHARLESTON WV 25314Purpose of Disbursement  
EVENT CATERING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
06	16	2014

Amount of Each Disbursement this Period

3403.80
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Transaction ID : SB17.I1037

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

14988.35
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
MEETING EXPENSE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		14		2014

Amount of Each Disbursement this Period

1082.70
---------

Transaction ID : SB17.I975

**B. DEEM STRATEGIC CONSULTING, LLC**

Mailing Address 337 FOUNTAIN VIEW

City	State	Zip Code
MORGANTOWN	WV	26505

Purpose of Disbursement  
SEE MEMO

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		24		2014

Amount of Each Disbursement this Period

1176.82
---------

Transaction ID : SB17.I947

**C. DEEM STRATEGIC CONSULTING, LLC**

Mailing Address 337 FOUNTAIN VIEW

City	State	Zip Code
MORGANTOWN	WV	26505

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		24		2014

Amount of Each Disbursement this Period

729.43
--------

Transaction ID : SB17.I948

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2259.52

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. OFFICE DEPOT**

Mailing Address 6600 N MILITARY TRL

City	State	Zip Code
BOCA RATON	FL	33496

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		24		2014

Amount of Each Disbursement this Period

10.59
-------

Transaction ID : SB17.I949

[MEMO ITEM]

**B. UPS**

Mailing Address 55 GLENLAKE PKWY NE

City	State	Zip Code
ATLANTA	GA	30328

Purpose of Disbursement  
SHIPPING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		24		2014

Amount of Each Disbursement this Period

436.80
--------

Transaction ID : SB17.I950

[MEMO ITEM]

**C. DEEM STRATEGIC CONSULTING, LLC**

Mailing Address 337 FOUNTAIN VIEW

City	State	Zip Code
MORGANTOWN	WV	26505

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

Amount of Each Disbursement this Period

1855.00
---------

Transaction ID : SB17.I956

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1855.00
---------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 98 OF 117

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. DEEM STRATEGIC CONSULTING, LLC**

Mailing Address 337 FOUNTAIN VIEW

City	State	Zip Code
MORGANTOWN	WV	26505

Purpose of Disbursement  
SEE MEMO

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2014

Amount of Each Disbursement this Period

1879.37
---------

Transaction ID : SB17.I999

**B. DEEM STRATEGIC CONSULTING, LLC**

Mailing Address 337 FOUNTAIN VIEW

City	State	Zip Code
MORGANTOWN	WV	26505

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2014

Amount of Each Disbursement this Period

1060.00
---------

Transaction ID : SB17.I1000

[MEMO ITEM]

**C. DEEM STRATEGIC CONSULTING, LLC**

Mailing Address 337 FOUNTAIN VIEW

City	State	Zip Code
MORGANTOWN	WV	26505

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2014

Amount of Each Disbursement this Period

525.30
--------

Transaction ID : SB17.I1002

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1879.37
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 99 OF 117

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. LIQUOR BARN**

Mailing Address 91 BAUMONT CENTER PKWY

City	State	Zip Code
LEXINGTON	KY	40513

Purpose of Disbursement  
EVENT BEVERAGES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2014

Amount of Each Disbursement this Period

294.07
--------

Transaction ID : SB17.I1001

**[MEMO ITEM]****B. FLS CONNECT, LLC**

Mailing Address 7300 HUDSON BLVD, STE 270

City	State	Zip Code
ST. PAUL	MN	55128

Purpose of Disbursement  
TELEMARKETING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

Amount of Each Disbursement this Period

521.30
--------

Transaction ID : SB17.I954

**C. MAI & ASSOCIATES LLC**

Mailing Address 901 N MONROE ST APT 1306

City	State	Zip Code
ARLINGTON	VA	22201

Purpose of Disbursement  
SEE MEMO

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

Amount of Each Disbursement this Period

5057.30
---------

Transaction ID : SB17.I971

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5578.60

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. MAI & ASSOCIATES LLC**

Mailing Address 901 N MONROE ST APT 1306

City	State	Zip Code
ARLINGTON	VA	22201

Purpose of Disbursement  
CAMPAIGN STRATEGY

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

Amount of Each Disbursement this Period

5000.00
---------

Transaction ID : SB17.I972

**[MEMO ITEM]****B. NATION BUILDER**

Mailing Address 448 S HILL ST, STE 200

City	State	Zip Code
LOS ANGELES	CA	90013

Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2014

Amount of Each Disbursement this Period

11.02
-------

Transaction ID : SB17.I1005

**C. NATION BUILDER**

Mailing Address 448 S HILL ST, STE 200

City	State	Zip Code
LOS ANGELES	CA	90013

Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2014

Amount of Each Disbursement this Period

37.70
-------

Transaction ID : SB17.I1026

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

48.72

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. NATION BUILDER**

Mailing Address 448 S HILL ST, STE 200

City	State	Zip Code
LOS ANGELES	CA	90013

Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		06		2014

Amount of Each Disbursement this Period

42.78
-------

Transaction ID : SB17.I1027

**B. NATION BUILDER**

Mailing Address 448 S HILL ST, STE 200

City	State	Zip Code
LOS ANGELES	CA	90013

Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		15		2014

Amount of Each Disbursement this Period

41.65
-------

Transaction ID : SB17.I1047

**C. NATION BUILDER**

Mailing Address 448 S HILL ST, STE 200

City	State	Zip Code
LOS ANGELES	CA	90013

Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2014

Amount of Each Disbursement this Period

2.07
------

Transaction ID : SB17.I1048

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

86.50

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. OLIVERIO'S CATERING**

Mailing Address 507 E MAIN ST

City	State	Zip Code
BRIDGEPORT	WV	26330

Purpose of Disbursement  
EVENT CATERING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

Amount of Each Disbursement this Period

2139.50
---------

Transaction ID : SB17.I970

**B. PAYCHEX**

Mailing Address 911 PANORAMA TRL S

City	State	Zip Code
ROCHESTER	NY	14625

Purpose of Disbursement  
PAYROLL FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

Amount of Each Disbursement this Period

65.50
-------

Transaction ID : SB17.I1016

**C. PAYCHEX**

Mailing Address 911 PANORAMA TRL S

City	State	Zip Code
ROCHESTER	NY	14625

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

Amount of Each Disbursement this Period

2132.56
---------

Transaction ID : SB17.I1017

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4337.56

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 911 PANORAMA TRL S

City	State	Zip Code
ROCHESTER	NY	14625

Purpose of Disbursement  
PAYROLL FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		16		2014

Amount of Each Disbursement this Period

67.75
-------

Transaction ID : SB17.I1018

**B. PAYCHEX**

Mailing Address 911 PANORAMA TRL S

City	State	Zip Code
ROCHESTER	NY	14625

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		16		2014

Amount of Each Disbursement this Period

1547.28
---------

Transaction ID : SB17.I1019

**C. PAYCHEX**

Mailing Address 911 PANORAMA TRL S

City	State	Zip Code
ROCHESTER	NY	14625

Purpose of Disbursement  
PAYROLL FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

67.75
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Transaction ID : SB17.I1020

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1682.75

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 911 PANORAMA TRL S

City State Zip Code  
ROCHESTER NY 14625Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

2282.00
---------

Transaction ID : SB17.I1021

**B. PAYCHEX**

Mailing Address 911 PANORAMA TRL S

City State Zip Code  
ROCHESTER NY 14625Purpose of Disbursement  
PAYROLL FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

Amount of Each Disbursement this Period

68.75
-------

Transaction ID : SB17.I1028

**C. PAYCHEX**

Mailing Address 911 PANORAMA TRL S

City State Zip Code  
ROCHESTER NY 14625Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

Amount of Each Disbursement this Period

2497.52
---------

Transaction ID : SB17.I1029

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4848.27

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 911 PANORAMA TRL S

City	State	Zip Code
ROCHESTER	NY	14625

Purpose of Disbursement  
PAYROLL FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 27 / 2014

Amount of Each Disbursement this Period

54.32
-------

Transaction ID : SB17.I1039

**B. PAYCHEX**

Mailing Address 911 PANORAMA TRL S

City	State	Zip Code
ROCHESTER	NY	14625

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 27 / 2014

Amount of Each Disbursement this Period

2672.50
---------

Transaction ID : SB17.I1040

**C. PAYPAL**

Mailing Address 2211 N 1ST ST

City	State	Zip Code
SAN JOSE	CA	95131

Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 05 / 2014

Amount of Each Disbursement this Period

30.00
-------

Transaction ID : SB17.I1003

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2756.82



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. PAYPAL**

Mailing Address 2211 N 1ST ST

City	State	Zip Code
SAN JOSE	CA	95131

Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2014

Amount of Each Disbursement this Period

75.90
-------

Transaction ID : SB17.I1025

**B. PAYPAL**

Mailing Address 2211 N 1ST ST

City	State	Zip Code
SAN JOSE	CA	95131

Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2014

Amount of Each Disbursement this Period

31.30
-------

Transaction ID : SB17.I1046

**C. PAYPAL**

Mailing Address 2211 N 1ST ST

City	State	Zip Code
SAN JOSE	CA	95131

Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		24		2014

Amount of Each Disbursement this Period

3.60
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Transaction ID : SB17.I945

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

110.80

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. PAYPAL**

Mailing Address 2211 N 1ST ST

City	State	Zip Code
SAN JOSE	CA	95131

Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 29 / 2014

Amount of Each Disbursement this Period

57.50
-------

Transaction ID : SB17.I946

**B. POLITICAL INK, INC.**

Mailing Address 1341 CONNECTICUT AVE NW, STE 5

City	State	Zip Code
WASHINGTON	DC	20036

Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 11 / 2014

Amount of Each Disbursement this Period

1372.26
---------

Transaction ID : SB17.I1035

**C. PROFESSIONAL DATA SERVICES, INC.**

Mailing Address 2470 DANIELS BRIDGE RD STE 121

City	State	Zip Code
ATHENS	GA	30606

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 30 / 2014

Amount of Each Disbursement this Period

4572.29
---------

Transaction ID : SB17.I952

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6002.05

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. RISING TIDE MEDIA GROUP LLC**

Mailing Address 226 S FAYETTE ST

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
MEDIA PRODUCTION

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 30 / 2014

Amount of Each Disbursement this Period

5500.00
---------

Transaction ID : SB17.I973

**B. SIGNS PLUS**

Mailing Address 1342 GREENBAG RD

City	State	Zip Code
MORGANTOWN	WV	26508

Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 30 / 2014

Amount of Each Disbursement this Period

908.18
--------

Transaction ID : SB17.I974

**C. STRATEGIC MEDIA SERVICES, INC.**

Mailing Address 3299 K ST NW, STE 200

City	State	Zip Code
WASHINGTON	DC	20007

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 13 / 2014

Amount of Each Disbursement this Period

10000.00
----------

Transaction ID : SB17.I969

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

16408.18

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. THE THEODORE COMPANY, LLC**

Mailing Address P.O. BOX 320412

City	State	Zip Code
ALEXANDRIA	VA	22320

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2014

Amount of Each Disbursement this Period

4304.00
---------

Transaction ID : SB17.I953

**B. WEST VIRGINIA STATE TAX DEPARTMENT**

Mailing Address PO BOX 1667

City	State	Zip Code
CHARLESTON	WV	25326

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

Amount of Each Disbursement this Period

638.00
--------

Transaction ID : SB17.I1036

**C. WEST VIRGINIA STATE TAX DEPARTMENT**

Mailing Address PO BOX 1667

City	State	Zip Code
CHARLESTON	WV	25326

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2014

Amount of Each Disbursement this Period

30.00
-------

Transaction ID : SB17.I1038

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4972.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McKinley for Congress**

Full Name (Last, First, Middle Initial)

**A. WEST VIRGINIA REPUBLICAN PARTY**

Mailing Address P.O. BOX 2711

City	State	Zip Code
CHARLESTON	WV	25330

Purpose of Disbursement  
RENT AND DATABASE REIMBURSEMENT

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 01 / 2014

Amount of Each Disbursement this Period

1375.00
---------

Transaction ID : SB17.I955

**B. WEST VIRGINIA REPUBLICAN PARTY**

Mailing Address P.O. BOX 2711

City	State	Zip Code
CHARLESTON	WV	25330

Purpose of Disbursement  
RENT AND DATABASE REIMBURSEMENT

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 02 / 2014

Amount of Each Disbursement this Period

1375.00
---------

Transaction ID : SB17.I997

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
---------------------

Amount of Each Disbursement this Period

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2750.00
---------

113636.39
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**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 112 OF 117

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : LS10311.C1095

McKinley for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election:

David McKinley

☐ Primary☐ General☒ Other (specify) ▼

Primary 2010

Mailing Address

23 Stamm Ln

City

State

ZIP Code

Wheeling

WV

26003-5542

Original Amount of Loan

100000.00

Cumulative Payment To Date

85000.00

Balance Outstanding at Close of This Period

15000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
03 / 31 / 2010

Date Due

M M / D D / Y Y Y Y

On Demand

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

15000.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 113 OF 117

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : Ls10311.C1097

McKinley for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election:

David McKinley

☐ Primary☐ General☒ Other (specify) ▼

Primary 2010

Mailing Address

23 Stamm Ln

City

State

ZIP Code

Wheeling

WV

26003-5542

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
04 / 21 / 2010

Date Due

M M / D D / Y Y Y Y

On Demand

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

50000.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 114 OF 117

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : LS10311.C1098

McKinley for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

David McKinley

**[PERSONAL FUNDS]**

Election:

☐ Primary☐ General☒ Other (specify) ▼

Primary 2010

Mailing Address

23 Stamm Ln

City

State

ZIP Code

Wheeling

WV

26003-5542

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
04 / 30 / 2010

Date Due

M M / D D / Y Y Y Y

On Demand

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

100000.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 115 OF 117

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
McKinley for Congress

Transaction ID : LS10311.C1100

LOAN SOURCE Full Name (Last, First, Middle Initial)

David McKinley

**[PERSONAL FUNDS]**

Election:

☐ Primary☐ General☒ Other (specify) ▼

General 2010

Mailing Address  
23 Stamm Ln

City

State

ZIP Code

Wheeling

WV

26003-5542

Original Amount of Loan

150000.00

Cumulative Payment To Date

100000.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 30 / 2010

Date Due

M M / D D / Y Y Y Y  
On Demand

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

50000.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : LS10311.C1101

McKinley for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

David McKinley

**[PERSONAL FUNDS]**

Election:

☐ Primary☐ General☒ Other (specify) ▼

General 2010

Mailing Address

23 Stamm Ln

City

State

ZIP Code

Wheeling

WV

26003-5542

Original Amount of Loan

150000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

150000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 30 / 2010

Date Due

M M / D D / Y Y Y Y  
On Demand

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

150000.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 117 OF 117

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : LS10311.C1103

McKinley for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

David McKinley

**[PERSONAL FUNDS]**

Election:

☐ Primary☐ General☒ Other (specify) ▼

General 2010

Mailing Address

23 Stamm Ln

City

State

ZIP Code

Wheeling

WV

26003-5542

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
10 / 26 / 2010

Date Due

M M / D D / Y Y Y Y  
On Demand

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

50000.00

**TOTALS** This Period (last page in this line only)..... ►

415000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.